

*Training for MTF  
Action Team  
Facilitators*

# **Building an Action Plan for Practice Guideline Implementation**

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# Overview

- **Preparing for action plan development**
- **The planning process and products**
- **Suggestions for approach and methods**
- **Example of an action plan (worksheets)**

# The Facilitator's Role

- **Help the implementation team reach decisions**
  - **Lead the team's planning discussion**
  - **Generate data/information for planning**
  - **Stay outside the content matter discussion**
- **Support the champion during implementation**
- **Facilitate implementation activities by clinics**
  - **Lead meeting discussions when requested**
  - **Generate data for feedback on progress**

*Chapter 3 in the Implementation Guide*

# Build an Effective Implementation Strategy and Action Plan

***Realistic action plan*** - be aware of constraints

***Overall strategy*** - establish a clear focus  
(e.g., focus on the largest population)

***Actions to carry out strategy*** - define clearly

- What -- Who -- When
- Gantt chart to check actions for feasibility



***Monitoring*** - cover the full scope of guideline elements

# Pre-Planning Preparation: Baseline Data on Current Practices

- ***Patient population*** size and characteristics  
(*from ADS and CHCS data*)
  - Number of patients by active duty, dependent, retiree
  - Clinical characteristics (if available in data)
  - Clinics serving the patients
- ***Current practices in clinics*** serving the patients  
(*observation and interviews with clinic staff*)
  - How clinic identifies patients with the condition
  - How patients are processed during clinic visits
  - Clinic practices for each guideline key element

***Chapter 4 in the Implementation Guide***

# Address Two Important Strategies

	Local Buy-In	NO Local Buy-In
Systems DO support practices		<i>Provider Resistance</i>
Systems DO NOT support practices	<i>Frustrated Providers</i>	

# The Planning Steps

1. Analyze gaps between guideline and current practices

Worksheet 1

2. Identify barriers to making changes to close gaps

(no worksheet)

3. Develop an overall strategy and specific actions

Strategy - worksheet 1  
Actions - worksheets 2, 3

Worksheet 4

4. Establish metrics and monitor progress

*Chapter 4, Appendix D in the Implementation Guide*

# Suggestions for Approach

- Test actions on a small scale (*Guide - Chapter 5*)
  - The PDSA cycle - **p**lan, **d**o, **s**tudy, **a**ct
  - Helps to reduce resistance to change
  - Builds ownership in tested techniques
- Establish a “forgiving” environment to learn from both successes and failures
- Strategy to monitor progress (*Guide - Chapter 6*)
  - First test whether changes really happened
  - Then focus on process changes
  - Use small-scale chart reviews



# Suggested Facilitation Techniques

- Nominal group process
- Affinity grouping
- Sub-group planning method

*Appendix E in the  
Implementation Guide*

# Nominal Group Process

- **Features of the method**
  - **Provides structure for group discussion**
  - **Helps group reach consensus on complex decisions**
  - **Allows all members to contribute to discussion**
- **Steps to take**
  - **Each member suggests an item**
  - **Rank items by priority**
  - **Discuss ranking results**
  - **Review and modify ranking list**

# Affinity Grouping

- **Features of the method**
  - **Groups individual items into related categories**
  - **Helps identify barriers that cut across elements**
  - **Allows all members to contribute to grouping**
- **Steps to take**
  - **Use cards or self-stick notes**
  - **Each member places a card in a grouping location**
  - **Other members add cards to the grouping**
  - **Discuss groupings as a team; move items if desired**
  - **Brainstorm to label each group**

# Sub-Group Planning Method

- **Features of the method**
  - **Breaks full team into subgroups for parallel tasks**
  - **Good for defining actions**
  - **Full team reconciles subgroup products**
- **Steps to take**
  - **Establish subgroups of 2-3 people; assign tasks**
  - **Subgroups complete tasks and worksheets**
  - **Reconvene full team and consolidate actions**
  - **Check full schedule of actions for feasibility**

# **A Sample Action Plan**

## ***Low Back Pain Guideline Application***

# Overall Strategy for Implementing the Low Back Pain Guideline

MTF: \_\_\_\_\_

## *Strategy:*

Ensure that primary care clinics use appropriate conservative treatment for acute low back pain patients.

Give special attention to two TMCs that are farthest from the guideline.

# MTF: Priorities for Low Back Pain Guideline Implementation

## Guideline Element

## Action Strategy

- |   |   |
|---|---|
| 1. Identify patients with serious assessments for (red flag) problems   | <i>Low priority</i> ; monitor red flags using documentation form            |
| 2. Conservative treatment of acute LBP patients in clinics. Focus on TMCs that are farthest from the guideline. | <i>High priority</i> ; make sure that conservative treatment is used in all |
| 3. Evaluate patients who get worse  | <i>Low priority</i>   |
| 4. Evaluate patients who do not get better low back pain patients.  | <i>Moderate priority</i> ; need more data on management practices for acute |
| 5. Manage chronic LBP/sciatica  | <i>Low priority</i>   |

**MTF:** \_\_\_\_\_

	Action <i>[describe briefly]</i>	Who will do it		Tools & Resources
		Lead:	Others:	
IN.1	Working meeting video, with clinic leaders to run cases in guideline and decide how to introduce it at clinics		Champion  LBP cases	Command CME
IN.2	Conduct training CME video, sessions for clinic physicians and other staff		Champion  documentation form	Clinic leaders



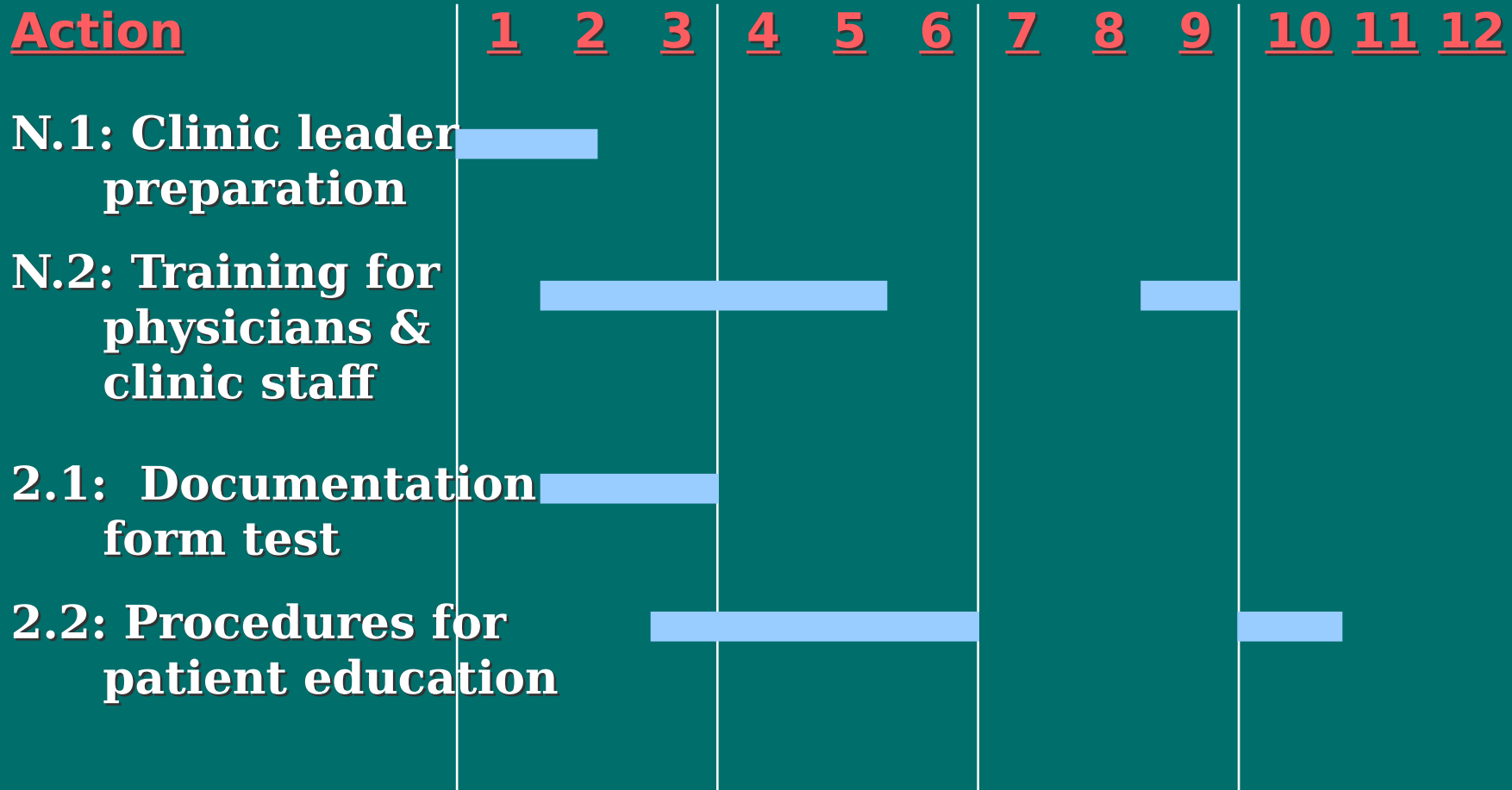
# MTF: Actions for Each Low Back Pain Guideline Element

## 2. Conservative Treatment of Acute LBP Patients

<b>Action</b> <b><u>[describe briefly]</u></b>	<b>Who will do it</b> <b><u>Lead:</u></b>	<b><u>Others:</u></b>	<b><u>Tools &amp; Resources</u></b>
2.1 Test use of LBP Champion QM/UM staff, Documentation documentation form in one clinic to see effect on visit efficiency		clinic leaders	form
2.2 Define procedures to Patient education educate patients about self-care and exercise; train clinic staff to use them with patients	Clinic	leaders	QM/UM staff
		back class	brochure, model

# MTF: Low Back Pain Guideline Implementation Schedule

## MONTH OF IMPLEMENTATION



# MTF: Low Back Pain Metrics and Monitoring

## Monitoring

<u>Guideline Element</u>	<u>Metric</u>	<u>Schedule</u>
1. Identify patients with serious pull 10-15 charts (red flag) problems	documentation	% charts with each month
2. Conservative treatment of acute LBP patients	% patients with pain scale data	pull charts each quarter
3. Evaluate patients who get worse	% referrals to neurology	quarterly
4. Evaluate patients who do not get better	No measure	
5. Manage chronic LBP or sciatica	% chronic LBP sent to back school	quarterly